

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-----------|-------------|-----------------|
| FEE DETERMINATION | <i>SA</i> | | <i>08-02-01</i> |
| O.I.P.E. CLASSIFIER | | <i>8</i> | <i>8-13-01</i> |
| FORMALITY REVIEW | <i>SA</i> | <i>1082</i> | <i>09/05/01</i> |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

☒ Rejected
☐ Allowed
☐ (Through numeral) Canceled
☐ Restricted
☐ Non-elected
☐ Interference
☐ Appeal
☐ Objected

| Claim | Date |
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| Claim | Date |
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| Claim | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

256
10/9/01
M7B